

BEST AVAILABLE COPY

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.L.P.E. CLASSIFIER		4/3	4/19/01
FORMALITY REVIEW	LEK	1036	5-108-01

INDEX OF CLAIMS

✓ _____ Rejected N _____ Non-elected
- _____ Allowed I _____ Interference
(Through numeral) Canceled A _____ Appeal
+ _____ Restricted O _____ Objected

Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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